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PTO/SB/22 (10-00)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number
210121.427C11

In re Application of Jiangchun Xu et al.

Application Number 09/483,672 Filed January 14, 2000

For COMPOSITIONS AND METHODS FOR THERAPY AND DIAGNOSIS OF PROSTATE CANCER

Group Art Unit
1631 Examiner
Marjorie A. Moran

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

- | | |
|--|---------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$110 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$_____ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$_____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$_____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$_____ |
|
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____. | |
| <input checked="" type="checkbox"/> A check including the amount of the fee is enclosed. | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | |
| <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. | |
| <input type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required to Deposit Account Number <u>19-1090</u> . | |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, to Deposit Account Number <u>19-1090</u> . | |

I am the applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record.

attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). _____

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May 19, 2003

Date

05/22/2003 AWONDAF1 00000042 09483672

110.00 OP

Signature

Julie Swartz 50,461
Jeffrey Hundley, Ph.D., Patent Agent

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
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